U.S. Department of Justice United States Marshals Service

## Case 3:14-cv-01310-Kl Document 11 Filed 11/06/14 Page 1 of 1 of Justice PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Anthony Cross				ILEDO6 NOV *14	14:44usdc-orp	COURT CASE NUMBER 3:14-cv-01310-KI				
DEFENDANT City of Portlan	nd, Asheim, Dei	frain, Burley	, Murphy	, Dale, Duilio			TYPE OF PROCESS Civil Summons, Complaint, etc.			
•	NAME OF INDIV	IDUAL, COM	PANY, COF	RPORATION, ETC.	TO SERVE OR DE	SCRIPTI	ON OF PROPERTY TO	SEIZE C	R CONDEMN	
SERVE	Charles Ashein		N . C	in Control 7ID C	- 1-1					
AT				ity, State and ZIP Con n St., Portland, (						
END NOTICE C				ME AND ADDRES		Т				
							ber of process to be ed with this Form 285	9		
405	chary Spier, Atto 5 NW 18th Ave rtland, OR 9720		V				Number of parties to be served in this case		7	
							ck for service			
CDECIAL INCTE	LICTIONS OF OT	LIED INICODM	ATION TH	ATWILL ACCION	N EVDEDITING SE	DVICE (	Include Business and A	Itaenata A	Adresses	
All Telephone N	umbers, and Estima	ted Times Ava	ilable for Se	rvice):	I LA LOTTING DE	ACTED (	The same of the sa	THE TAXABLE TO	Control of the contro	
discovery/sc The above de beginning or	heduling order, efendant works end of shift. Pro-	discovery ag 4 p.m. to 2 a ecinct # (503	greement, i.m. Wedn 3) 823-570	case management esday through S	nt schedule	B Direct	trate consent, IFP of	nedule se	ervice at	
Signature of Aporney other Originator requesting service on behalf of:							TELEPHONE NUMBER		DATE	
	01				DEFENDANT	(503)	305-3730	9/30/	14	
SPACE B	ELOW FOR	USE OF	U.S. M	ARSHAL ON	NLY DO NO	OT W	RITE BELOW	THIS	LINE	
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 fif more			District of District to Signature of Authorize Origin			rized USI	ized USMS Deputy or Clerk		Date	
han one USM 28.	5 is summitted)	<u> </u>	No. 42	No. 65	- nau	na	12 Duy		10/8/10	
hereby certify and the individual	nd return that I I h, company, corporat	nave personally ion, etc., at the	served, address show	have legal evidence wn above on the on t	of service, have the individual, comp	e executed	as shown in Remarks oration, etc. shown at the	s", the proc ne address	ess described inserted below.	
I hereby certi	ify and return that I	am unable to lo	cate the indi	vidual, company, co	orporation, etc. name	d above (	See remarks below)			
Name and title of individual served (if not shown above)							A person of suitable age and discretion then residing in defendant's usual place of abode			
Address (complete only different than shown above)							Date	Time	Пат	
							Signature of U.S. M	1Z archal or I	Deputy	
Service Fee	Total Mileage Chi		ling Fee	Total Charges	Advance Deposits		unt owed to U.S. Marsh ount of Refund*)	al* or		
(65	23°	)   (	8	68.30			\$0.0	7 g	: 1	
REMARKS:	Receptions that it n	st wo	nslow 90 to	s would	nt accept ordinator	pro	ce54 <sub>7</sub>	RTLAND	RECE	
PRINT 5 COPH	2. USMS REC 3. NOTICE OI 4. BILLING S	ORD F SERVICE TATEMENT*:		ned to the U.S. Mars			PRIOR	EDITION S		
		nt is owed. Plea LEDGMENT O		mptly payable to U.	.S. Marshal.				Form USM Rev.	